

MAR 28 2006

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CALIFORNIA 94304-1018TELEPHONE: 650.613.5600
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To:

NAME:	FACSIMILE:	TELEPHONE:
Commissioner for Patents U.S. Patent and Trademark Office	571-273-8300	571-272-4000

FROM: Catherine M. Polizzi,
Reg. No. 40,130

DATE: March 28, 2006

Number of pages with cover page:	4	Originals Will Not Follow
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Preparer of this slip has confirmed that facsimile number given is correct: 12056/eag4

Comments:

Attorney Docket No.: 420042000200
 Group Art Unit: 1614
 Examiner: C. Delacroix-Muirhead
 Serial No.: 09/937,840
 Filing Date: January 28, 2002
 Inventor: Patrick SOON-SHIONG et al.
 Title: LONG TERM ADMINISTRATION OF PHARMACOLOGICALLY ACTIVE AGENTS

Attached Documents:

1. Transmittal (1 page)
2. Power of Attorney (Form PTO/SB/80) (1 page)
3. Statement Under 37 CFR 3.73(b) (1 page)

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PTO/SB/21 (09-04)

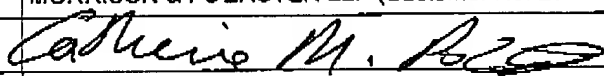
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	09/937,840
		Filing Date	April 21, 2000 (Int'l.)
		First Named Inventor	Patrick SOON-SHIONG
		Art Unit	1614
		Examiner Name	C. Delacroix-Muirhead
Total Number of Pages in This Submission	3	Attorney Docket Number	420042000200

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address - 1 page <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): -Statement Under 3.73(b): 1 page -Fax cover Sheet
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP (Customer No. 25226)		
Signature			
Printed name	Catherine M. Polizzi		
Date	March 28, 2006	Reg. No.	40,130

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office, facsimile no. 571-273-8300, on the date shown below.	
Dated: March 28, 2006	Signature: <u>Elsa Guezic</u> (Elsa Guezic)

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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

☒ Practitioners associated with the Customer Number: **25226**

OR

☐ Practitioner(s) named below (If more than ten patent practitioners are to be named, then a customer number must be used):

Name	Registration Number	Name	Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:

☒ The address associated with Customer Number: **25226**

OR

☐ Firm or Individual Name

Address

City

State

Zip

Country

Telephone

Fax


Assignee Name and Address:

American BioScience, Inc.
2730 Wilshire Boulevard, Suite 500
Santa Monica, California 90403

A copy of this form, together with a statement under 37 CFR 3.73(b) (Form PTO/SB/96 or equivalent) is required to be filed in each application in which this form is used. The statement under 37 CFR 3.73(b) may be completed by one of the practitioners appointed in this form if the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

The individual whose signature and title is supplied below is authorized to act on behalf of the assignee

Signature		Date	3.07.06
Name	Richard E. Maroun	Telephone	(310) 883-3146
Title	Secretary and General Counsel		

Attorney Docket No.: 4200428D0100

pa-1040689

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STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Patrick SOON-SHIONG et al.Application No./Patent No.: 09/937,840 Filed/Issue Date: April 21, 2000 (Int'l)Entitled: LONG TERM ADMINISTRATION OF PHARMACOLOGICALLY ACTIVE AGENTSAmerican BioScience, Inc., a corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

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B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

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[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Catherine M. Polizzi
Signature

March 28, 2006

Date

Catherine M. Polizzi (Reg. No. 40,130)
Printed or Typed Name

(650) 813-5651
Telephone Number

Attorney of Record for Assignee
Title

Attorney Docket No. 420042000200